2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000012072

Name:

Address:

City-St-Zip:

ROJAS, NIDIA M

PO BOX 143427

MIAMI, FL 331143427

FILED Jan 08, 2008 Secretary of State

Entity Nan	ne: AEROGR	OUP INTERNATIONAL, INC.		•	
Current Principal Place of Business:			New Principal Place	of Business:	
13302 SW MIAMI, FL					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 143427 MIAMI, FL 331143427					
FEI Number:	65-0853173	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SANDRA P. KAYAL CPA PA 16501 SW 81 AVE MIAMI, FL 33157 US			13302 SW 128TH ST.	MARTINEZ, JOAQUIN R MR. 13302 SW 128TH ST. MIAMI, FL 33186 US	
The above in the State		submits this statement for the pur	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: JOAQUIN R. MARTINEZ				01/08/2008	
Electronic Signature of Registered Agent			t	Date	
Election Carr	ıpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/S () MARTINEZ, J. F PO BOX 14342 MIAMI, FL 331	7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T/D () MARTINEZ, J. F PO BOX 14342 MIAMI, FL 331	7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	V ()	Delete	Title ·	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JOQUIN R. MARTINEZ P 01/08/2008